

Probation Officer's Name \_\_\_\_\_

**MONTHLY ADULT REPORT FORM  
BOONE SUPERIOR II PROBATION DEPARTMENT**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Has this changed since your last contact? \_\_\_\_\_ yes \_\_\_\_\_ no

This report is for the month of \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

What kind of work are you doing? \_\_\_\_\_

Has your employment changed since your last visit? \_\_\_\_\_ yes \_\_\_\_\_ no

How many days did you work during the month? \_\_\_\_\_

Any reason for not working? \_\_\_\_\_

If you do not have a job, how long have you been without one? \_\_\_\_\_

Where have you tried to get one? \_\_\_\_\_

Are your fine and court costs paid in full? \_\_\_\_\_

If not, how much do you owe? \_\_\_\_\_

What about probation user fees? \_\_\_\_\_

If the Court ordered you to pay restitution, how much have you paid during the last month?

Has your marital status changed since your last visit? \_\_\_\_\_

If so, please explain. \_\_\_\_\_

Have you been arrested for any cause during this month? \_\_\_\_\_

If so, please explain. \_\_\_\_\_

Do you have any special problems or trouble that you would like to talk over? \_\_\_\_\_

If so, please explain. \_\_\_\_\_

I believe the above statements are correct:

Signature \_\_\_\_\_

Mail this to: Boone Superior Court II Probation, 104 Courthouse Square, Lebanon, IN 46052 or fax:  
765-483-4414

**Must receive this by the 20<sup>th</sup> of the month.**